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Bib Data Sheet

CONFIRMATION NO. 1829

|   |   |                               |   |   |                                |
|---|---|-------------------------------|---|---|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/024,843  | <b>FILING DATE</b><br>12/18/2001<br><b>RULE</b>   | <b>CLASS</b><br>358           | <b>GROUP ART UNIT</b><br>2622   | <b>ATTORNEY DOCKET NO.</b><br>10313US01 |                                |
| <b>APPLICANTS</b><br>Donald L. Swihart, Stillwater, MN;<br><br><b>** CONTINUING DATA *****</b><br><br><b>** FOREIGN APPLICATIONS *****</b>  |   |                               |   |   |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 01/25/2002</b>  |   |                               |   |   |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged _____<br>Examiner's Signature Initials |   | <b>STATE OR COUNTRY</b><br>MN | <b>SHEETS DRAWING</b><br>4  | <b>TOTAL CLAIMS</b><br>26               | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>Attention: Amelia A. Buharin<br>Imation Corp.<br>Legal Affairs<br>P.O. Box 64898<br>St. Paul, MN 55164-0898   |   |                               |   |   |                                |
| <b>TITLE</b><br>Scaling factor tools  |   |                               |   |   |                                |
| <b>FILING FEE RECEIVED</b><br>932   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                |